



REDACTED- FOR PUBLIC INSPECTION

June 24, 2015

VIA OVERNIGHT DELIVERY

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, DC 20554

RE: **Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission**

Dear Ms. Dortch:

Mountain View Telephone Company, a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sincerely,


Sara Zimmerman
President

Enclosures

cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division
State Regulatory Agency HERE

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**
FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	401712
<015> Study Area Name	MOUNTAIN VIEW TEL CO
<020> Program Year	2016
<030> Contact Name: Person USAC should contact with questions about this data	Leslie Dewey
<035> Contact Telephone Number: Number of the person identified in data line <030>	8704253100 ext.
<039> Contact Email Address: Email of the person identified in data line <030>	leslie.dewey@yelcot.com

ANNUAL REPORTING FOR ALL CARRIERS		54,313 Completion Required	54,422 Completion Required
		(check box when complete)	
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> ← check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	<div style="border: 1px solid black; height: 40px; width: 100%;"></div> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> MVTC_401712ar510.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> MVTC_401712ar610.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/>	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability Certification	Yes <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010> <div style="border: 1px solid black; height: 40px; width: 100%;"></div> 401712ar1010.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Certify whether terrestrial backhaul options exist (Yes or No) <input checked="" type="radio"/> <input type="radio"/>	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

<2000> Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelpcot.com

<110> Has your company received its ETC certification from the FCC? (yes / no) ☒ ☐

If your answer to Line <110> is yes, do you have an existing § 54.202(a) "5 year plan" filed with the FCC? (yes / no) ☒ ☐

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

401712ax112.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113> Maps detailing progress towards meeting plan targets

<114> Report how much universal service (USF) support was received

<115> How much (USF) was used to improve service quality and how support was used to improve service quality

<116> How much (USF) was used to improve service coverage and how support was used to improve service coverage

<117> How much (USF) was used to improve service capacity and how support was used to improve service capacity

<118> Provide an explanation of network improvement targets not met in the prior calendar year.

Yes
Yes
Yes
Yes
Yes
Yes

[illegible]

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelpcot.com

<701>	Residential Local Service Charge Effective Date	1/1/2015
<702>	Single State-wide Residential Local Service Charge	15.3

[illegible]

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yeilcot.com

[illegible]

<010>	Study Area Code	431712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Devey
<035>	Contact Telephone Number - Number of person identified in data line <030>	9704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.devey@yelcot.com
<810>	Reporting Carrier	Mountain View Telephone Company
<811>	Holding Company	Yelcot Holding Group, Inc.
<812>	Operating Company	Mountain View Telephone Company

[illegible]

**(900) Tribal Lands Reporting
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yeicot.com

<910> Tribal Land(s) on which ETC Serves

--

<920> Tribal Government Engagement Obligation

--

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@ye1cot.com

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lenlie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lealie.dewey@yelcot.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

MVTC_401712ar1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

*Please check those boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation**Data Collection Form****Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	401722
<015>	Study Area Name	POCONO VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	9704223100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@pvcot.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))
- <2011a> 3rd Year Certification (47 CFR § 54.313(b)(1))
- <2011b> Attachment (47 CFR § 54.313(b)(1))

Name of Attached Document(s) Listing Required Information

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(e))

- <2012> 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))
- <2013> 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))
- <2014> 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))
- <2015> 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband
- Connect America Phase II Reporting (47 CFR § 54.313(e))**
- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification

- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document(s) Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0886/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	401712
<015> Study Area Name	MOUNTAIN VIEW TEL CO
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035> Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@velcat.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan
 Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313(f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☐

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))

(Yes/No) ☒ ☒

(3014) If yes, does your company file the RUS annual report

(Yes/No) ☒ ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

☒

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☒

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited?

(Yes/No) ☐ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

☐

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3021) Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit

☐

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.

☐

(3023) Underlying information subjected to a review by an independent certified public accountant

☐

(3024) Underlying information subjected to an officer certification.

☐

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dwyer
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dwyer@ycorp.com

- Financial Data Summary
- (3027) Revenue
 - (3028) Operating Expenses
 - (3029) Net Income
 - (3030) Telephone Plant In Service(TPIS)
 - (3031) Total Assets
 - (3032) Total Debt
 - (3033) Total Equity
 - (3034) Dividends



**Certification - Reporting Carrier
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelcot.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: MOUNTAIN VIEW TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/25/2015
Printed name of Authorized Officer: Anne Schuhknecht	
Title or position of Authorized Officer: Vice President	
Telephone number of Authorized Officer: 8704253100 ext.	
Study Area Code of Reporting Carrier: 401712	Filing Due Date for this form: 07/01/2015
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	401712
<015> Study Area Name	MOUNTAIN VIEW TEL CO
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035> Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelcot.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
<small>Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.</small>	

Attachments

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CG
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253120 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yrcot.com

<701> Residential Local Service Charge Effective Date	1/1/2015
<702> Single State-wide Residential Local Service Charge	15.3

<703>

[illegible]

(710) Broadband Price
Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@elcot.com

[illegible]

(800) Operating Companies Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	401712
<015>	Study Area Name	MOUNTAIN VIEW TEL CO
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Leslie Dewey
<035>	Contact Telephone Number - Number of person identified in data line <030>	8704253100 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	leslie.dewey@yelcot.com
<810>	Reporting Carrier	Mountain View Telephone Company
<811>	Holding Company	Yelcot Holding Group, Inc.
<812>	Operating Company	Mountain View Telephone Company

[illegible]

REDACTED – For Public Inspection

Mountain View Telephone Company, Inc. (SAC 401712)

ATTACHMENT - Line 112

FIVE YEAR SERVICE QUALITY IMPROVEMENT PLAN PROGRESS REPORT

ATTACHMENT REDACTED IN ITS ENTIRETY

Mountain View Telephone Company
481 Line 112 – Five Year Service Quality Improvement Plan PROJECT
Study Area: 401712

**REDACTED - FOR
PUBLIC INSPECTION**



Mountain View Telephone Company
481 Line 112 – Five Year Service Quality Improvement Plan PROJ
Study Area: 401712

**REDACTED - FOR
PUBLIC INSPECTION**



Mountain View Telephone Company
481 Line 112 – Five Year Service Quality Improvement Plan PROJECT 112-112-112
Study Area: 401712

**REDACTED - FOR
PUBLIC INSPECTION**



REDACTED - FOR
PUBLIC INSPECTION

Mountain View Telephone Company
401712

Study Area Code
Study Area



Mountain View Telephone Company STUDY AREA 401712



Mountain View Telephone CO.
Study Area 401712

Mountain View Telephone

Company

**REDACTED - FOR
PUBLIC INSPECTION**



Mountain View Telephone Company
481 Line 510 Service Quality & Standards
Study Area: 401712

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3), Mountain View Telephone Company is in compliance with appropriate FCC Service Quality Standards, Consumer Protection Rules, as well as standards and procedures as defined in the Arkansas Public Service Commission Telecommunication Provider Rules of Practice and Procedure.

Mountain View Telephone Company provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis to ensure compliance with the CPNI rules, which include new carrier authentication requirements, a requirement to notify customers of account changes, and a requirement to notify both law enforcement and customers in the event of a CPNI breach. Mountain View Telephone Company trains staff on an annual basis regarding Red Flag issues to help prevent identify theft. All company employees are required to sign and acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules. Mountain View Telephone Company also conducts subscriber CPNI outreach by periodically placing CPNI explanation messages into subscriber's bills and also has signage in its business office regarding CPNI rules and regulations.

Mountain View Telephone Company complies with consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3.

Mountain View Telephone Company
481 Line 610 Emergency Situations
Study Area 401712

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Mountain View Telephone Company
481 Line 610 Emergency Situations
Study Area 401712

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Mountain View Telephone Company
481 Line 1010 Voice Services Comparability Report
Study Area 401712

Mountain View Telephone Company
Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Mountain View Telephone Company (the Company) is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of \$47.48 as specified in Public Notice DA 14-470 issued on April 16, 2015.

This applies to all of the Company's exchanges (870-269, 870-585, 870-652, 870-757, 870-363, 870-591, 870-746, 870-948.) The Company's current total local end-user rate is \$15.30. When the Arkansas High Cost Fund (5%), the Federal SLC (\$6.50), ARC Charge (\$1.50), and Arkansas TeleRelay Service (\$.05) are added the rate totals \$24.10. Therefore Mountain View Telephone Company's pricing is not above the standard deviation as specified in the USF/ICC Transformation Order.¹

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

¹ USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."
."

3rd Revised Sheet No. 13a

Replacing: 2nd Revised Sheet No. 13a

Mountain View Telephone Company, Inc.
Name of Company

Kind of Service: Telecommunications Class of Service: Res/Bus

Part III. Rate Schedule No.: 1

Title: LOCAL SERVICE

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1.3. LIFELINE ASSISTANCE PROGRAM

1.3.1. General

(CT)

1.3.1.1. The Lifeline Assistance Program provides for a federal credit equal to 100% of the Interstate Subscriber Line Charge (\$6.50) and a \$2.75 local service reduction.

1.3.1.2. The discounts apply to monthly recurring rates for qualifying residential customers.

1.3.1.3. Discounts are applied to rates and charges for residential telephone service.

1.3.2. Regulations

1.3.2.1. Regulations specified in Part III, Rate Schedule No. 3, Page 15 of this tariff or rate schedule apply to Lifeline Service.

1.3.2.2. Lifeline Service is available only with residence service, excluding foreign exchange service.

1.3.2.3. Lifeline Service is limited to one line per household.

1.3.2.4. The named subscriber to the local telecommunications service, his or her dependent, or someone in his or her household must participate in one of the listed assistance programs to qualify for Lifeline Service. The federal and state credits are applied to the Local Service bills for qualified residential recipients of Supplemental Security Income (SSI), Food Stamps, Aid to Families with Dependent Children recipients, Medicaid, federal public housing assistance or Section 8, Low Income Home Energy Assistance Program (LIHEAP), recipients of Temporary Assistance to Needy Families, participants in the National School Lunch free lunch program, or families whose household income falls below 135% of the Federal Poverty Guideline.

(CT)

2nd Revised Sheet No. 13b

Replacing: 1st Revised Sheet No. 13b

Mountain View Telephone Company, Inc.
Name of Company

Kind of Service: Telecommunications Class of Service: Res/Bus

Part III. Rate Schedule No.: 1

Title: LOCAL SERVICE

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1.3. LIFELINE ASSISTANCE PROGRAM (continued)

(CT)

1.3.2.5. The Customer will certify under penalty of perjury that the information supplied at the time of application for Lifeline service is accurate. The Company will obtain sufficient documentation from the customer to verify that the customer qualifies for Lifeline and an officer of the Company will certify that the Company has procedures to review the application for Lifeline Service in accordance with 47 U.S.C. Part 54.

1.3.2.6. The Company will process all applications and apply the appropriate credit on the customer's monthly bill.

1.3.2.7. Customers of Lifeline Service must notify the Company of any changes which would affect qualification. Verification of eligibility will take place initially and at a minimum annually each year of service thereafter. When the customer is no longer eligible for Lifeline Service, the discount will be discontinued and regular rates and charges will apply.

1.3.3. Rates and Charges

1.3.3.1. Monthly Credit (maximum of one line per qualified customer)

1.3.3.2. A discount equal to 100 percent of the Interstate Subscriber Line Charge is applicable to qualified residential customers (\$6.50).

(CT)

1.3.3.3. A reduction of \$2.75 of the Local Service Rate.

(RT)

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Mountain View Telephone Company
481 Line 3010 Milestone Certification
Study Area 401712

Milestone Certification

Pursuant to 47 C.F.R. § 54.202 MOUNTAIN VIEW TELEPHONE COMPANY ("The Company") provides this certification that it is taking reasonable steps to provide upon reasonable request broadband speeds of at least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to offerings in urban areas as determined in an annual survey as specified in Public Notice DA 15-470, and that requests for such service are met within a reasonable amount of time. Details for how The Company is meeting its obligations for meeting its goals and required obligations are specified within the FCC Form 481 annual filing. At the time of this filing, there are no unfulfilled, reasonable requests for 4 Mbps downstream/1 Mbps upstream service.



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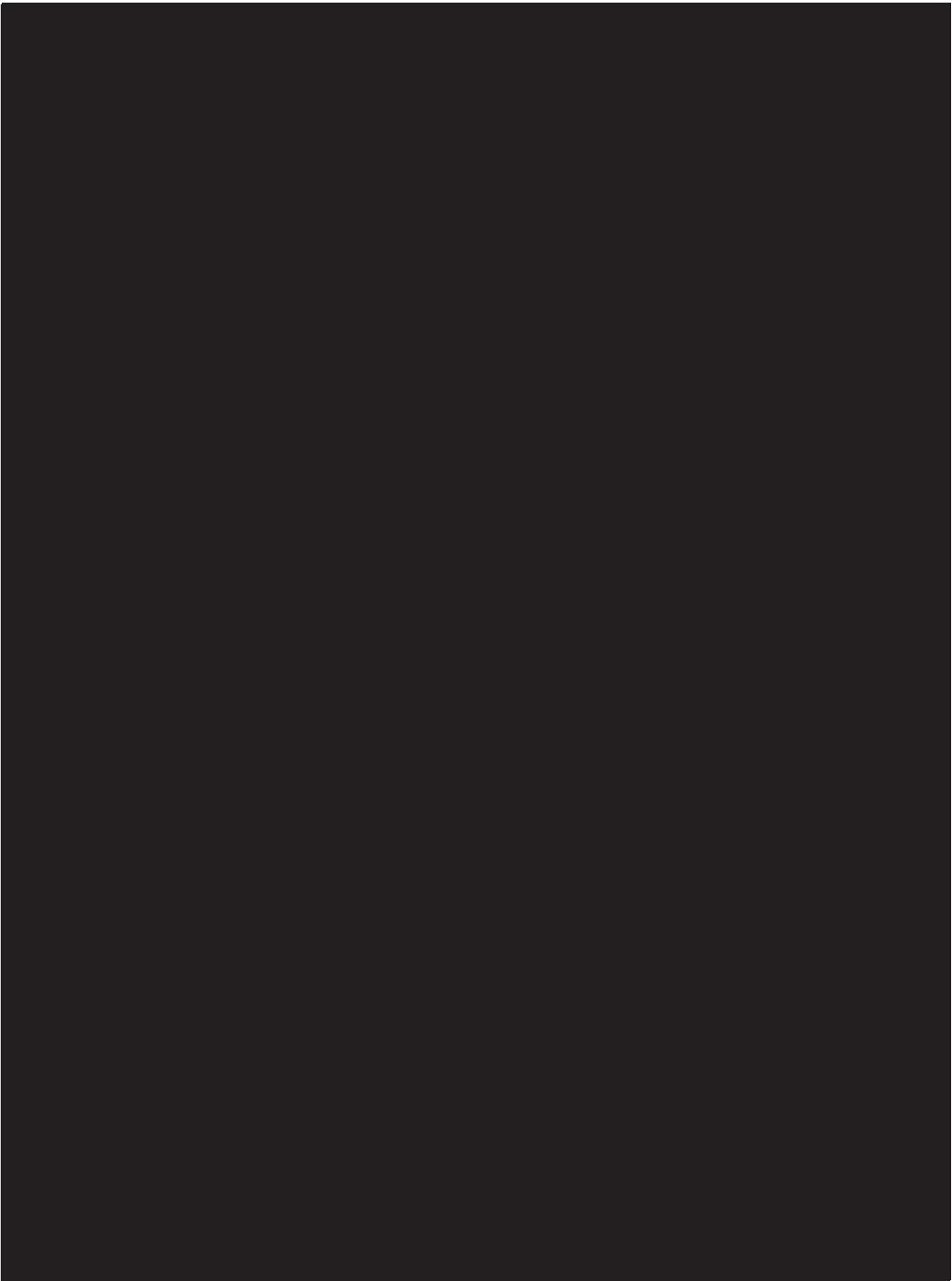
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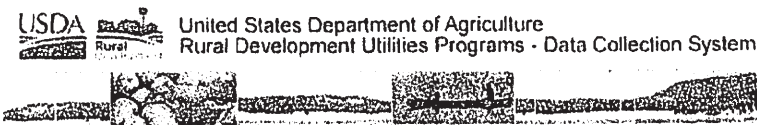
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